IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Art Unit:

Examiner:

2629

Yuk Chow

In re application of:

Tetsuya Ooshima, et al.

Serial No:

10/809,100

Confirmation No.:

6656

Filed:

March 25, 2004

For:

PORTABLE INFORMATION PROCESSING

APPARATUS AND METHOD FOR

DISPLAYING IMAGE

Mail Stop AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBE PREVIOUSLY PAID I		(Col. 3) PRESENT EXTRA*		LG/SM \$ ENTITY FEE		ADD'L FEE DUE	
TOTAL CLAIMS FEE	18	-	24	**	0	LG=\$50 SM=\$25	\$50	\$	0	
INDEPENDENT CLAIMS FEE	6	-	6	***	3	LG=\$200 SM=\$100	\$200	\$	0	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS LARGE ENTITY FEE = \$360 SMALL ENTITY FEE = \$180								\$	0	
ADDITIONAL SIZE FEE (IF ANY) (TOTAL PAGES OF SPEC AND DRAWINGS TOGETHER) \$250 FOR EACH ADDITIONAL 50 SHEETS								\$	0	
							TOTAL	\$	0	

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

Please charge our Deposit Account No. 50-1314 in the amount of \$..to cover the additional claims.

The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314.

Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims

Any patent application processing fees under 37 C.F.R. § 1.17

Date: January 16, 2008

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Respectfully submitted, HOGAN & HARTSON L.L.P.

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